PART B - FEE(S) TRANSMITTAL

omplete and send this form, together with applicable fee(s), to: Mail

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23628

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03/09/2005

WOLF GREENFIELD & SACKS, PC FEDERAL RESERVE PLAZA **600 ATLANTIC AVENUE** BOSTON, MA 02210-2211

06/07/2005 HG

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APPLIC 09/3 Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. 12:500 (Depositor's name)

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	1400.00 OP	4	one 3, 2005	(Signature)	
ATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
84,959	08/27/1999	RAM SASISEKHARAN	M0656/7046HC	8533	
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TITLE OF INVENTION: RATIONALLY DESIGNED HEPARINASES DERIVED FROM HEPARINASE I AND II

APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL F	EE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	1	\$0	\$1	1400	06/09/2005
EXA	MINER	ART UN	IT	CLASS-SUBCLASS]		
HUTSON,	RICHARD G	1652		435-200000	_		
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		nt attorneys a member a nes of up to	2Sacks, P.C		
3. ASSIGNEE NAME ANI	D RESIDENCE DATA TO E	E PRINTED ON T	HE PATEN	T (print or type)			

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

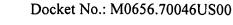
Massachusetts Institute Of Technology Cam	bridge, MA	02139
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Please check the appropriate assignee category or categories (will not be 4a. The following fee(s) are enclosed:	printed on the patent):
Issue Fee	A check in the amount of the fee(s) is enclosed.
Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.
Advance Order - # of Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
The Director of the USPTO is requested to apply the Issue Fee and Publi NOTE: The Issue Fee and Publication Fee (if required) will not be accep interest as shown by the records of the United States Patent and Tradema	cation Fee (if any) or to re-apply any previously paid issue fee to the application identified above. ted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in rk Office.
1	

Authorized Signature _ Janice A. Vatland, Ph.D. Typed or printed name

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Sasisekharan et al.

Confirmation No.:

09/384959

8533

Filed:

August 27, 1999

For:

RATIONALLY DESIGNED HEPARINASES DERIVED FROM

HEPARINASE I AND II

Examiner:

R. G. Hutson

Art Unit:

1652

CERTIFICATE OF MAILING UNDER 37 C.F.R. 1.8(a)

The undersigned hereby certifies that this document is being placed in the United States mail with first-class postage attached, addressed to MAIL STOP ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on June 7, 2005.

Nicole Millette Hawes/Michelle M. Quinn

MAIL STOP ISSUE FEE

Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith are the following documents:

- Part B Fees Transmittal
- Return Receipt Postcard

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617) 646-8000, Boston, Massachusetts.

A check in the amount of \$1,400.00 to cover the issue fee is enclosed. If the fee is insufficient, the balance may be charged to the account of the undersigned, Deposit Account No. 23/2825. A duplicate of this sheet is enclosed.

Respectfully submitted,

Janice A. Vatland, Ph.D., Reg. No. 52,318

Wolf, Greenfield & Sacks, P.C.

600 Atlantic Avenue

Boston, Massachusetts 02210-2206

Tel. No.: (617) 646-8000 Fax No.: (617) 646-8646

Docket No.: M0656.70046US00

Date: June 3, 2005

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